PTO/SB/06 (05-03)

Approved for use through 4/30/2003, OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

											ation or Docket Number		
		CLAIMS AS		SMALL ENTITY		OTHER THAN							
(Column 1) (Column 2)							SMALL	:NIII Y	ı	SMALL	ENIIIY		
DASI	FOR	NUMBE	NUMBER FILED		NUMBER EXTRA		RATE	FEE	1	RATE	FEE		
BASIC FEE (37 CFR 1.16(a))								<u>\$385</u>	OR		s		
TOTAL CLAIMS (37 CFR 1.16(c))		17	minus 20 = - 0				x <b>s</b> _9_=	0	OR	x \$=			
INDEPENDENT CLAIMS (37 CFR 1.18(b))		3	minus 20	- 0	- 0		x s <u>43</u> =	0	OR	x \$=			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+ 5=		OR	+5=			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL	385	OR	TOTAL	,		
CLAIMS AS AMENDED – PART II													
(Column 1) (Column 2) (Column 3)							SMALL E	NTITY	OR	OTHER THAN SMALL ENTITY			
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE .	ADDI- TIONAL FEE		
Ž	Total (37 CFR 1.16(c))	•	Minus	••	=	ŀ	x s=		OR	x \$=			
AMENDMENT	Independent (37 CFR 1.16(b))	•	Minus	***	2		x s=		OR	x s=			
₽	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))						+\$=		OR	+ \$=			
						-	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
		(Column 1)		(Column 2)	(Column 3)								
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
M	Total (37 CFR 1.16(c))	•	Minus	**			x \$=		OR	x \$ =			
AMENDMENT	Independent (37 CFR 1.16(b))	•	Minus	***	=		x \$=		OR	x s=			
₽	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+s=		OR	+ 5=			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
		(Column 1)		(Column 2)	(Column 3)				_				
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
DME	Total (37 CFR 1,16(c))	•	Minus	**	=		x s=		OR	x \$=			
AMENDME	Independent (37 CFR 1.16(b))	•	Minus	***	=		x s=		OR	x \$=			
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))						+ 5 =		OR	+ 5 =			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
if the entry in column 1 is less than the entry in column 2, write "0" in column 3.  if the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  if the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" Collabor Independent is the highest number found in the appreciate box in column 1.													

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

2 m	FILED NUME	BER EXTRA	RATE BASIC FEE	FEE 385.00		RATE	FEE	
17 min		BER EXTRA	BASIC FEE	385.00	1 [			
2 m	nus 20= *	1		000.00	OR	BASIC FEE	770.00	
ريق [			XS 9=		OR	XS18=		
DECENT	inus 3 =  *		X43=		OR	X86=		
PRESENT			+145=		OR	+290=		
less than ze	ero, enter "0" in (	column 2	TOTAL	311	OR	TOTAL		
AMENDE	) - PART II				-	OTHER		
	(Column 2)	(Column 3)	SMALL		OR I	SWALL		
	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Minus	**	=	XS 9=		OR	X\$18=		
Minus	***	=	X43=		OR	X86=		
OLTIPLE DE	PENDENT CLAIM		+145=		OR	+290=		
	(Column 2)	(Column 3)_			-			
	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Minus	**	=	X\$ 9=		OR	X\$18=		
Minus	***	=	X43=		OR	X86=		
IULTIPLE DE	+145=		OR	+290=				
		TOTAL		OR	TOTAL ADDIT, FEE			
	(Column 2)	(Column 3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Minus	**	=	X\$ 9=		OR	X\$18=		
Minus	***	=	X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								
Paid For" IN TH	IIS SPACE is less th	an 3, enter "3."		propriate bo			<u></u>	
	Minus	AMENDED - PART II  (Column 2)  HIGHEST NUMBER PREVIOUSLY PAID FOR  Minus  ***  MULTIPLE DEPENDENT CLAIM  (Column 2)  HIGHEST NUMBER PREVIOUSLY PAID FOR  Minus  ***  MULTIPLE DEPENDENT CLAIM  (Column 2)  HIGHEST NUMBER PREVIOUSLY PAID FOR  Minus  ***  MULTIPLE DEPENDENT CLAIM  (Column 2)  HIGHEST NUMBER PREVIOUSLY PAID FOR  Minus  ***  MULTIPLE DEPENDENT CLAIM  (Column 2)  HIGHEST NUMBER PREVIOUSLY PAID FOR  Minus  ***  MULTIPLE DEPENDENT CLAIM  The entry in column 2, write "0" in column 2 is less the paid For" IN THIS SPACE is less the paid For IN THIS SPACE IS less the paid	(Column 2) (Column 3)  HIGHEST NUMBER PREVIOUSLY PAID FOR  Minus *** =  MULTIPLE DEPENDENT CLAIM  (Column 2) (Column 3)  HIGHEST NUMBER PREVIOUSLY PAID FOR  Minus *** =  MULTIPLE DEPENDENT CLAIM  (Column 2) (Column 3)  HIGHEST NUMBER PREVIOUSLY PAID FOR  Minus *** =  MULTIPLE DEPENDENT CLAIM  (Column 2) (Column 3)  HIGHEST NUMBER PREVIOUSLY PAID FOR  Minus *** =  MULTIPLE DEPENDENT CLAIM  The entry in column 2, write "0" in column 3.  Paid For" IN THIS SPACE is less than 20, enter "20."  Paid For' IN THIS SPACE is less than 3, enter "3."	AMENDED - PART II  (Column 2) (Column 3)  HIGHEST NUMBER PREVIOUSLY PAID FOR  Minus  ***    MINUS   ***   =	AMENDED - PART II  (Column 2) (Column 3)  HIGHEST NUMBER PREVIOUSLY PAID FOR  Minus *** =   MULTIPLE DEPENDENT CLAIM  (Column 2) (Column 3)  HIGHEST NUMBER PREVIOUSLY PAID FOR  Minus *** =   MULTIPLE DEPENDENT CLAIM  (Column 2) (Column 3)  HIGHEST NUMBER PRESENT EXTRA PAID FOR  Minus *** =   MULTIPLE DEPENDENT CLAIM  (Column 2) (Column 3)  HIGHEST NUMBER PRESENT EXTRA PREVIOUSLY PAID FOR  MINUS *** =   MULTIPLE DEPENDENT CLAIM  MINUS *** =   MULTIPLE D	Column 2	AMENDED - PART II  (Column 2) (Column 3)  HIGHEST NUMBER PREVIOUSLY PAID FOR  Minus *** =   MULTIPLE DEPENDENT CLAIM	